

PTO/SB/81 (04-05)

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Application Number	09 761421
Filing Date	
First Named Inventor	Robert L. Jones
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	

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Name	Registration Number
Leslie A. Thompson	54584

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

Signature	Robert L. Jones	Date	1-30-06
Name	Robert L. Jones	Telephone	504 237818
Title and Company	Owner		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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**REVOCATION OF POWER OF  
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NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number

09761421

Filing Date

First Named Inventor

Robert L. Jones

Art Unit

Examiner Name

Attorney Docket Number

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I hereby revoke all previous powers of attorney given in the above-identified application.



A Power of Attorney is submitted herewith.

OR



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The address associated with  
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Firm or  
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I am the:



Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Signature

Robert L. Jones

Name

Robert L. Jones

Date

1-30-06

Telephone

504 237 8158

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



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